

Wiltshire Council

Cabinet

18 June 2024

Subject: Urgent Care at Home - Service Options

Cabinet Member: Cllr Jane Davies Cabinet Member for Adult Social Care, SEND and Inclusion

Key Decision: Key

Executive Summary

In 2018, Wiltshire CCG and Wiltshire Council (the Council) invested funding from the Better Care Fund (BCF) in a range of services commissioned from Medvivo, as part of the Integrated Urgent Care Service contract for Wiltshire.

The original NHS Standard Contract commenced on 1 May 2018 and was awarded for a five-year (5) period, expiring on 30 April 2023. The aim of the services is to help to reduce unnecessary admissions to hospitals and residential care.

The BCF policy framework 2023-25 sets out the national conditions, metrics and funding arrangements for the Better Care Fund (BCF). The Telecare response and Urgent Care at Home services align with the BCF objective; *'improving overall quality of life for people, and reducing pressure on Urgent and Emergency Care, acute and social care services through investing in preventative services'*. Both services support people in crisis to avoid hospital admission.

The service supports Service Users who are at the point of crisis admission to hospital. The Service delivers this through the provision of a physical responder and/or urgent care support at the point of crisis. Responder and Care visits can be delivered twenty-four hours a day seven days a week and can be delivered on a continuous basis for up to a maximum of seventy-two hours after the first support is delivered.

The service also works with Service Users after a period of ill health or following an incident or injury, in order to reduce the likelihood that service users will require ongoing hospital treatment. The Service is not used to deliver planned visits of care but can be utilised after a Service User has returned home after a period of support and has experienced unexpected challenges relating to support at home.

The Service supports Service Users at point of crisis to remain safe within their own home while assessment for further support is completed. One of the primary objectives of this Service is to reduce inappropriate hospital admissions. This objective is delivered through providing a physical response or care

support at home at point of crisis following a referral from a health or social care professionals.

The Service also supports Carers who may have reached a point of crisis or may be at risk of reaching a point of crisis. By providing a physical responder or urgent care at home support to enable carers to take time out from their role and reduce the likelihood of carer breakdown.

Following an initial review of the services completed in January 2022, it was recommended that most of these services were retained by Medvivo, apart from those services funded from Wiltshire BCF, Urgent Care at Home and Telecare Response Services.

The services in scope of this decision are the Telecare Response and Urgent Care at Home services. The Council and BSW ICB (as Commissioners) and Medvivo (as the Provider) entered into a NHS Standard Contract which Bath and North East Somerset, Swindon and Wiltshire (BSW) Integrated Care Board (ICB) were the lead commissioner of the contract. The recommendation was these services should be removed from the BSW ICB Integrated Urgent Care Contract and the Council should contract directly from Medvivo; this plan was agreed by the Wiltshire Locality Commissioning Group in January 2022.

On the 29 March 2023, Cabinet approved a request to extend the contract by one year to 30 April 2024. Subsequently, in May 2023 a further direct award for one year (1 May 2024 - 30 April 2025) was approved by Wiltshire Locality Commissioning Group. This decision was made due to the ICB extending their contract by five years to enable Medvivo to secure a replacement 111 provider. Also, the decision made in May 2023 to extend to 30 April 2025 was to provide Wiltshire Council time to consider future commissioning options (figure 1).

Medvivo were aware of the contract extension but did not feel able to sign the Council's contract.

Medvivo and the Council have been unable to agree terms for a twelve (12) month extension. The parties have subsequently agreed to a short extension ending on 31 July 2024. The unexpected change in plans and the associated timescale has necessitated that these services are brought in-house, to be delivered under the existing Wiltshire Support at Home Service which was already being scoped as one of the options.

Proposals

That Cabinet:

- 1) Approves the delivery of the Urgent Care at Home and Telecare Response Service to Wiltshire Council in-house services from the 1 August 2024 at an annual cost of £1.665m, to be funded from the Better Care Fund.

- 2) Delegates to Emma Legg, Director Adult Social Care in consultation with Cllr Jane Davies, Cabinet Member for Adult Social Care, SEND and Inclusion to finalise operational matters to ensure a safe transfer of the services. This will include the TUPE transfer of eligible staff and the purchase of the necessary resources such as uniforms, laptops, phones, equipment for service deliver and the use of fleet vehicles.

Reason for Proposals

The transfer of the services from Medvivo to the Council was due to take place 1st May 2025, however accelerating this to nine (9) months earlier than expected has required the Council to act quickly to ensure vulnerable people are not left without support. The three (3) month extension period has been agreed to allow for staff eligible for TUPE transfer(s) to be identified, alongside putting other operational requirements in place.

The service in scope consists of:

Urgent Care at Home; when a situation is moving into crisis, it can often be stabilised with some domiciliary support. Through the timely provision of experienced carers who can respond to presenting issues, risks can be managed to safeguard the situation. An example would be a carer who helps and supports a partner with dementia being admitted unexpectedly to hospital. Urgent Care could provide 24 hour support to look after the person at home until their partner returned home or alternative arrangements were made.

Telecare Response; Wiltshire Council commissions a telecare call response service with Apello. When a personal alarm is triggered, for example because of a fall, Apello call the person and find out how to best support them through a conversation on the phone system. The telecare response service can provide a physical response in the form of a community visit when it is deemed safe and appropriate to do so, for example when an alarm has been triggered and the person cannot be contacted. In some circumstances it is not appropriate to use this service, for example when the risks require a medical emergency response. The telecare triage service at Apello carefully manage these risks to ensure they are referring onto the most appropriate service.

Bringing the service in-house was the preferred option (to start 1 May 2025) but the inability of the parties to agree terms for a further twelve (12) month extension has forced an earlier timetable.

We are confident that the service can be delivered through the Council's Wiltshire Support at Home (WSAH) Service. WSAH is currently commissioned to provide a domiciliary support service working with Homefirst and Reablement to support hospital discharges. This expansion will support the Urgent Care Response Service (UCR) - the Wiltshire Health and Care Service commissioned to provide clinical response within 2 hours. Wiltshire Support at Home urgent support service will work with Wiltshire Health and Care and provide complimentary wrap around support to stabilise crisis and prevent hospital admission. This service will be short term and is commissioned for up to 72 hours. WSAH will also be able to return to supporting Carer breakdown as this funding was removed in March 2024. Wiltshire Support at Home is an in-house service part of the established Reablement Therapy and Community Service it

supports health and social care across Wiltshire, operating 7 days a week 7 am-10pm. There is a structured registered provider in place and this can be expanded, and the existing staff group utilised within the service to provide a seamless transfer of services. We have a service with trained staff already providing an urgent response to crisis situations and there is experienced and skilled leadership and management who can support this transfer.

Lucy Townsend
Corporate Director, People

Wiltshire Council

Cabinet

18 June 2024

Subject: Urgent Care at Home - Service Options

Cabinet Member: Cllr Jane Davies Cabinet Member for Adult Social Care, SEND and Inclusion

Key Decision: Key

Purpose of Report

To seek approval from Cabinet of plans to bring the Urgent Care and Telecare Response Services in-house. This is a change to an executive approval made in May 2023 to make a direct award to the existing provider, Medvivo for a 12 month period. This report seeks approval for the provision of the in-house service, Wiltshire Support at Home, to be funded by the Better Care Fund at a cost of £1.665m per year.

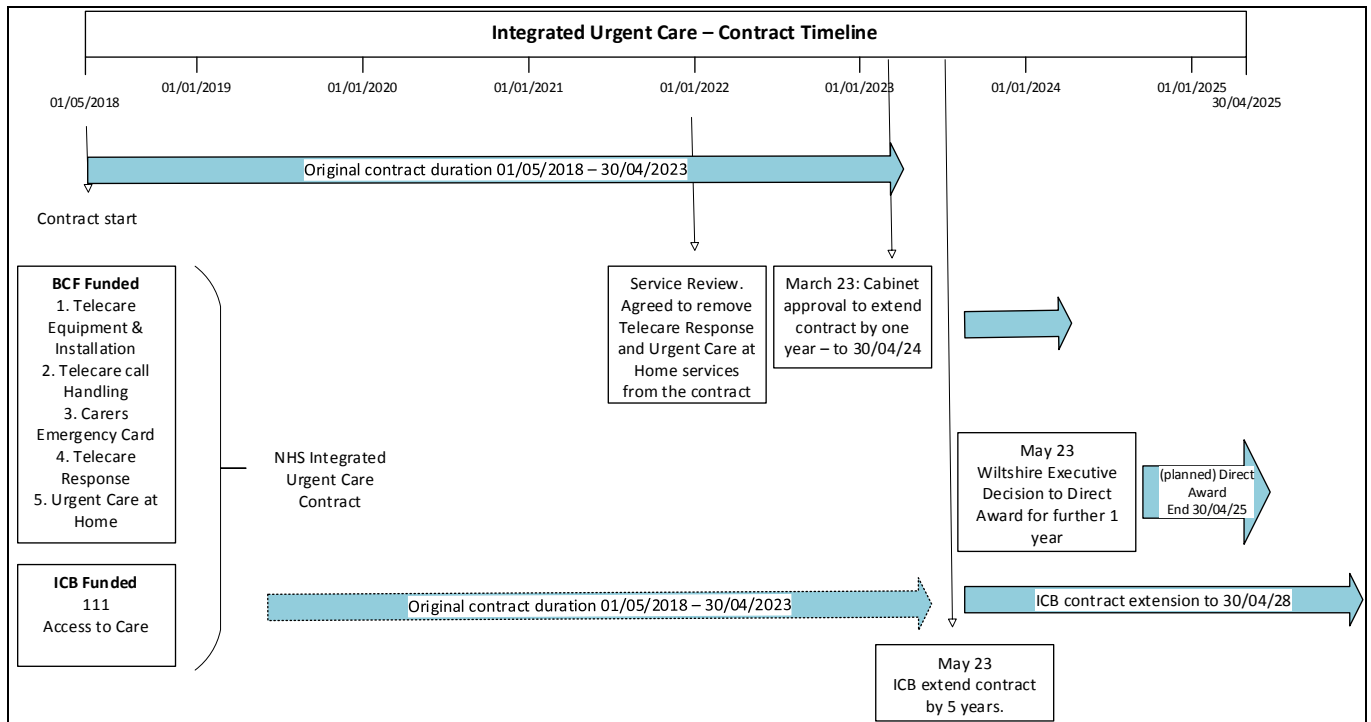
Relevance to the Council's Business Plan

1. Urgent Care and Telecare Response Services support the Council's Business Plan which aims to support people in remaining independent and to live and age well in their own homes. By reviewing services in a timely way, the Council can make decisions that deliver best value for money and ensure the right services are in place at the right time. The Council plan to provide training for the care staff involved in providing these services to enable them to take a strengths based preventative approach, for example if they are called to a situation where the person has had a number of falls then referring on to reablement for intervention may prevent the need for a formal commissioned services.

Background

2. The original contract commenced on 1 May 2018, and was awarded for a five-year (5) period, with the original expiry date of 30 April 2023. On the 29 March 2023, Cabinet approved a request to extend the contract by 1 year to 30 April 2024. In May 2023 a further executive decision was made by the Wiltshire Locality Commissioning Group for a direct award of one year (from 1st May 2024-30 April 2025). This situation arose due to ICB extending their contract by five years to enable Medvivo to secure a replacement 111 provider. The decision was also made for a direct award to provide a further year until 30th April 2025 to ensure Wiltshire Council had time to consider future commissioning options.

Figure 1: Medvivo Contract Timeline



3. Medvivo and the Council, however, were unable to agree the terms of the direct award and therefore it was mutually agreed that the contract would be extended for 3 months, instead of 12 months to enable a plan to be implemented to enable the new service to be delivered in-house through the Wiltshire Support at Home Service from 1 August 2024.
4. Due to the time constraints imposed with Medvivo deciding to cease providing the services one month before the contract ended, there were concerns from both parties about a safe transfer of the services and the requirement of both parties to comply with their TUPE obligations. Therefore, it was agreed that the parties continue under the existing terms of the NHS Standard Contract until 31 July 2024. This extended contract period was essential to provide sufficient time to ensure that TUPE arrangements are fully considered, and appropriate resources are in place to deliver the service in-house.
5. The time constraints have meant that the development of options has been expedited.
6. The TUPE process began on 24 April 2024. The Wiltshire Support at Home operational team are working with Medvivo to ensure they have the detailed understanding required to transfer the services safely. A project plan is in place and wider colleagues across HR, Legal, Fleet Services, IT and Facilities Management have been and continue to be engaged.
7. The total annual BCF budget allocated to the services is £1.665m per year (subject to centrally determined BCF annual uplifts).

- a. Telecare Response Service - £0.659m
- b. Urgent Care at Home - £1.006m

Main Considerations for the Council

8. It is proposed that the service is delivered as part of Wiltshire Support at Home (WSAH) Service. It is an in-house service of Wiltshire Council supporting health and social care, operating 7 days a week 7am-10pm. Apello will continue to provide 24-hour telecare response to calls and where it deemed as appropriate, they will refer into Wiltshire Support at Home for an in-person visit response. The in-person telecare response element will operate from 7am to 10pm. Few local authorities provide a physical telecare response service therefore Wiltshire will continue to provide an enhanced offer in comparison to many other local authorities who rely on family members and emergency services to provide a physical response. WSAH will provide 24-hour support as part of the Urgent Care at Home service which is pre-planned care. For example, short periods of live in care and overnight sitting services.
9. Bringing the service in-house was the preferred option from May 2025 and would have followed the end of the one (1) year direct award. However, due to the unforeseen inability to continue contracting with Medvivo, we have been required to transfer the services in-house at pace and in a considerable shorter time frame than previously planned for. The Council required a solution to deliver the services by 30 April 2024 so although other options that were considered these were not viable in the timeframe:
 - a. Extend the NHS contract for a further twelve (12) months. However, there was no provision in the contract to allow for this extension.
 - b. Contract with another provider. It was not possible to procure an alternative provider due to the timescales and type of service required.
 - c. Agree an extension based on Medvivo's requirements. Legal advice confirmed that this was not possible.
10. The service will continue to be funded through the Better Care Fund and no change to the budget is proposed. The fund is governed by a S.75 agreement between the Council and BSW ICB and all parties agree to bring the service in-house.

Safeguarding Implications

11. The Wiltshire Support at Home Service trains and monitors staff in the use of the Wiltshire Council safeguarding policies and processes. All new staff will undertake training and have regular supervision to assure that they understand their safeguarding duties as relevant to Wiltshire Council processes. Staff will be monitored in the early transition of the service to ensure the correct safeguarding protocol is followed. Staff will be managed as part of the CQC regulated service and the Registered Manager works closely with Wiltshire Council's established Adult Multi Agency Safeguarding Hub (MASH) team. Procedures and guidance are in place which will ensure that any issues relating to safeguarding children and young people are identified and appropriate referrals made to children's MASH.

Public Health Implications

12. There is no direct link to public health though the services do support a person's health and wellbeing by providing support during a crisis.
13. The BCF policy framework 2023-25 sets out the national conditions, metrics and funding arrangements for the Better Care Fund (BCF). The Telecare response and Urgent Care at Home services align with the BCF objective; *'improving overall quality of life for people, and reducing pressure on Urgent and Emergency Care, acute and social care services through investing in preventative services'*. Both services support people in crisis to avoid hospital admission.

Procurement Implications

14. There is no option to extend the current contract beyond the 3 months. There is no legal basis to allow extension by exemption. This current contract will end at the end of April 2025. We can extend the provision in an 'as is' basis with a 'letter of intent'. We will finalise timelines when we know how many staff would be subject to TUPE but we would aim for at least three months to prepare for the transfer.

Equalities Impact of the Proposal

15. An EqIA is being developed in collaboration with health colleagues. The service will continue to be open to all with access based on need.

Environmental and Climate Change Considerations

16. Bringing the services in-house will result in eligible staff being transferred from Medvivo to the Council in accordance with the TUPE Regulations or recruited into the service. These staff will work from existing Council Hubs – County Hall, Monkton Park and Bourne Hill or where relevant and appropriate. Given the flexible nature of the current hub use, it is anticipated that the increase in operational team staff will not adversely impact on the overall demand for space and resources at the hubs. Hubs are already resourced out of hours for other services.
17. There will be a need for the provision of laptops and mobile phones which will be accessed through the established process within Wiltshire Council. This will ensure the best value for money and longevity of devices as well as the appropriate technical support.
18. Both the Telecare Response and Urgent Care at Home services require staff to travel across the county. We propose to use fleet vehicles and we are engaging with transport colleagues to ensure capacity is available. The use of fleet vehicles will ensure the most efficient and environmentally friendly vehicles are used for the service.

Workforce Implications

19. The service transfer will involve TUPE arrangements. At the time of writing, Medvivo has identified 33 employees provisionally being in scope to transfer, of which the Council has confirmed TUPE will be applicable to those identified. Employee Liability Information has been requested by the Council from Medvivo.
20. There will be induction and training for all new staff associated with the transfer. These will be defined in more detail as the TUPE timeline progresses. Preparations are in place with the appropriate colleagues across HR, Payroll, training etc.

Risks that may arise if the proposed decision and related work is not taken

21. If we do not transfer the services in-house then the services will cease. This will impact on the system as a whole and carries a risk that vulnerable people will not have the care and support they need during a crisis.
22. This may lead to other services such as 111 and the ambulance service seeing an increase in referrals. There may also be a risk of increased attendances at local A&E departments. This may impact negatively on emergency care capacity as well as increase avoidable hospital admissions. This, in turn may put increased pressure on health and adult social care resources engaged with hospital discharges.
23. There is also a reputational risk arising from any publicity related to system impacts.
24. Mitigation to reduce these risks will include work with the Telecare call handler (Appello) to agree suitable referral points for callers.

Risks that may arise if the proposed decision is taken and actions that will be taken to manage these risks

25. There is a risk arising from the reduction in the current Telecare response service, from a 24/7 service to one that will run from 7am to 10pm. Calls will continue to be responded to by Apello 24/7 and they will continue to contact next of kin or Out of Hours (OOH) services as appropriate. A face-to-face response service will not be provided between 10pm and 7am. There may be a risk of an increase in referrals to 111 and ambulance services, some of the calls that are currently responded to by non-qualified support workers will also need a paramedic response. Data evidencing the number of call outs requiring a duplication of response is not currently available from the current provider. Few local authorities provide an in-person telecare response; therefore the plan is to align Wiltshire with other areas in providing a consistent service. Wiltshire will continue to respond to telecare calls within the specified hours and evaluate the demand and activity to ensure the service is delivering safely and effectively, should there be a requirement for an overnight response we will look at the options of commissioning an independent provider. Taking this approach will increase capacity to provide planned night sits and overnight care, preventing unplanned admissions and reducing the overnight crisis demand through more timely and managed interventions.
26. Part of our work to prepare for a May 2025 transfer in-house was to review the county-wide provision, highlight any duplication and work with other providers to

establish a true picture of demand and capacity of current providers. This review of provision will be completed in the first six months of the services operation. The review will identify how the Telecare Response and Urgent care at home services can work most effectively with other out of hours response services such as the Emergency Duty Service, Rapid Response, Out of Hours GP service and Community Nursing provision. The number of services, including a number of OOHs services gives added assurance that vulnerable people will have a suitable response service in a crisis. As we embed the Telecare Response and Urgent Care at Home services within Wiltshire Council, we will take care to avoid duplication with these existing services.

Figure 2: Hospital Avoidance Services

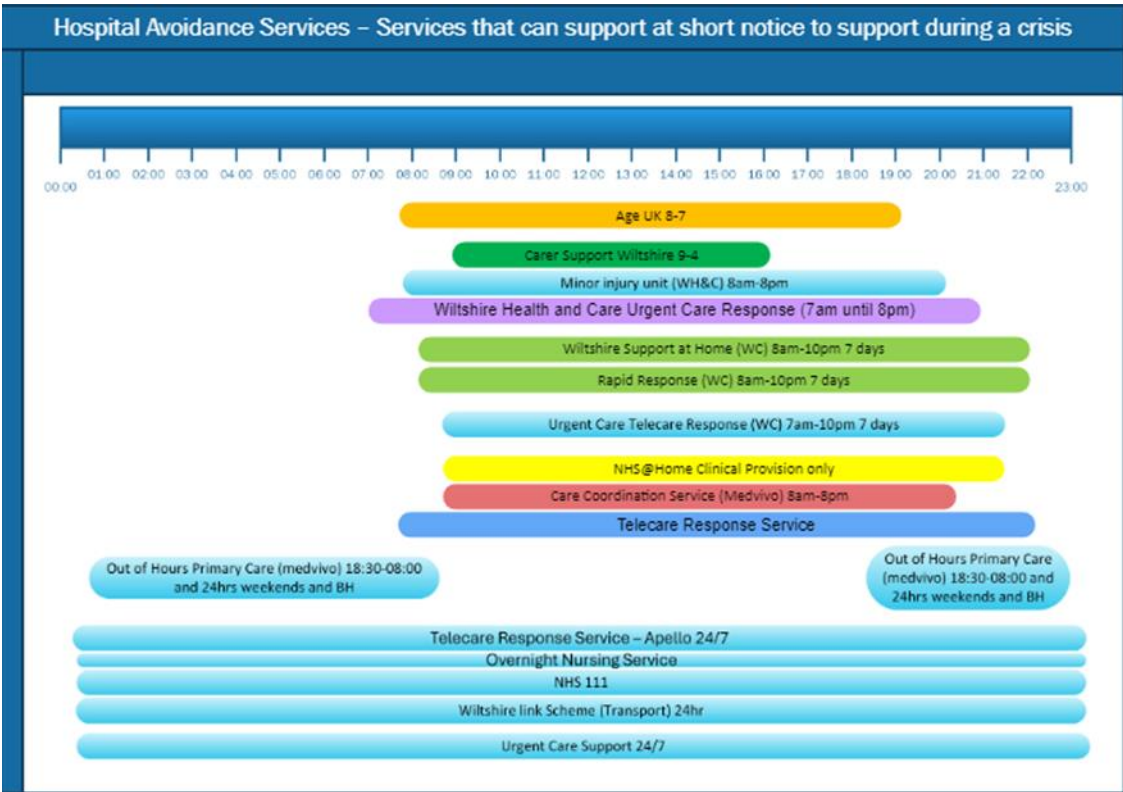


Figure 2 shows the spread of services in Wiltshire over a 24-hour period. The proposed change to the model will provide a more comprehensive offer of support to those people at risk of deteriorating into a crisis situation through the provision of more capacity for urgent care response including overnight support and night sitting services. Since the original commissioning of this urgent care contract a number of new services have become available in Wiltshire including Overnight nursing, NHS at Home and Urgent Care Clinical Response and Wiltshire Council Rapid Response. This means that there is now much more focus and capacity on prevention of admission and the effective management of those people who may be deteriorating into a crisis situation which means that the risks of reducing the overnight telecare response proportion of the service are to some extent already mitigated. Apello through their telephone response will continue to respond to alerts made overnight and will use their specialist triaging skills to ensure that an appropriate response is made to the presenting risk, this could be calling an ambulance or a relative/NOK.

Financial Implications

27. Section 75 of the NHS Act 2006 allows partners (NHS bodies and councils) to contribute to a common fund which can be used to commission health or social care related services. This power allows a local authority to commission health services and NHS commissioners to commission social care. It enables joint commissioning and commissioning of integrated services.
28. The costs of this service and contract are met from the Better Care Fund (BCF) as part of the section 75 agreement and managed through the BCF, so there is no direct impact on Council budgets. Any impact from over or underspends on this funding are agreed as a part of the section 75 agreement and managed through the BCF.
29. The change to the service will not deliver savings in the Adult Social Care budget, it will remain within the existing BCF budget allocated and any financial variance will be managed through this mechanism.

Legal Implications

30. Legal Services have been instructed to advise on this matter. Legal advice will continue to be sought until the conclusion of the project.
31. Legal Services have provided advice and assistance in respect of the extension to the existing contract with Medvivo to allow the TUPE arrangements to be fairly executed and for the safe transfer of the services. The actions taken have also been agreed with the ICB, who are lead commissioner for the larger NHS contract under which Medvivo provide the other services.
32. Legal Services will continue to advise on the arrangements to bring the service in-house.

Overview and Scrutiny Engagement

33. A briefing for the chair and vice chair will be arranged.

Options Considered

34. The following options were considered (table 1):

Table 1: Options

Option	Detail	Risks	Benefits	Estimated £ impact
1. Do nothing	The contract will end on 31 st July with no further UC@H or Telecare response provision	<ul style="list-style-type: none">Limited time to establish alternative service provision which may leave vulnerable people at risk.The Telecare response service (WC and Appello) commences on 1st May	There may be cost savings associated with a reduction on service provision	The remainder of the contract value would be used to buy alternative care via the domiciliary

		<p>2024 and this is based on the provision of the response service under separate contract. There would be some mitigation work to be done to ensure there are adequate alternative support mechanism that can be called upon for those using telecare.</p> <ul style="list-style-type: none"> • Reputational Risk to the council and ICB removing a service which is relied upon by vulnerable people. • Risks to other services which have interdependencies such as NHS at Home • Risks to ambulance performance due to increased requests for ambulance response 		care framework
2.Direct award 1 st May – 30 th April 2025.	<p>Continue with the original plan to make a direct award to Medvivo. This would require negotiation on many standard WC contractual terms and conditions. Legal advice is that this is possible. Medvivo have expressed that in its current form the contract is unviable for them.</p>	<ul style="list-style-type: none"> • Negotiations are likely to be difficult with a high chance that an agreed contractual position is not reached. This would take the focus of resources away from focussing on other options/opportunities. • Needing to compromise on some aspects of the contract to continue working with the current provider 	<ul style="list-style-type: none"> • No disruption to service. 	<p>Cost of the services would remain the same as per the BCF plan to 30th April 2025.</p>
3.a Bring all services in-house	<p>Wiltshire Council provide the services in-house using the Wiltshire Support at Home service.</p>	<ul style="list-style-type: none"> • WC may not replicate the services 'like for like' given that currently Medvivo are undertaking activity not specified in the current contract, There will be TUPE to consider. The number of staff and skills has yet to be defined by Medvivo. • WC do not currently provide OOHs care as the current services do so this will need 	<ul style="list-style-type: none"> • Control over the service provision and a better understanding of the activity. • Improved outcomes for customers • Modifying the model may bring savings on the overall cost. 	<p>There is likely to be some savings on the current cost of service provision but it is difficult to estimate with any accuracy without further information from Medvivo. We are not expecting the</p>

		to be considered and costed.	<ul style="list-style-type: none"> Better access to OoH care for social care need eg EDS 	in-house provision to cost more than the allocated BCF budget.
3.b Bring UC@H in-house only	Wiltshire Council bring just the Urgent care at Home service in-house, under the Wiltshire Support at Home service, while contracting out the Telecare response service.	<ul style="list-style-type: none"> A less risky option as the staff skills for UC@H are likely to be closer aligned to WS@H existing workforce. While there is a risk that we cannot find a provider to carry out the telecare response service it is felt to be a medium risk, given current market capacity and our dom care framework, which will allow for rapid procurement of provision Telecare response is not “normal dom care” work and therefore procuring a staff group with the appropriate skills and governance is unlikely within the timeframe 		We are not expecting the cost of this option to exceed the allocated BCF budget.
3 c Bring Telecare Response service in-house only	Wiltshire Council bring just the Telecare Response service in-house, under the Wiltshire Support at Home service, while contracting out the Urgent Care response service.	<ul style="list-style-type: none"> Managing and oversight of a dom care contract will require resource particularly as the time frame for provision is so short. Additional Brokerage capacity may be required. Telecare response is new territory to WC therefore consideration will need to be given to the skill mix and resource required (vehicles) 	Urgent Care Response more akin to domiciliary care and therefore easier to externally commission. The activity should be measurable making costing a model of provision possible.	

Conclusions

35. We have concluded that the best course of action is to transfer the service in-house. Wiltshire Support at Home is a service that provides good quality registered services, with strong leadership and governance and it employes well trained and experienced staff. The transfer of the service to Wiltshire Support at Home offers the opportunity to improve the delivery and consistency of the service and to work collaboratively with partners to optimise the available capacity to support more vulnerable residents in Wiltshire. This protects vulnerable people already receiving the service and ensures that crisis response within the wider county system is appropriately resourced.